V102071

Ceremed, Inc.

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OCT - 8 2010

510 (k) - Ostene®CT Soluble Bone Hemostasis Implant Material

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VI - 510 (K) SUMMARY

Submitted by:

Tadeusz Wellisz, M.D.

Ceremed, Inc.

3643 Lenawee Ave.

Los Angeles, California 90016

Tel: (310) 815-2125 Fax: (310) 815-2130

Contact Person:

Tadeusz Wellisz, M.D.

Date Prepared

October 06, 2010

Common/Usual Name:

Soluble Bone Hemostasis Implant Material

Proprietary Name:

Ostene®CT Bone Hemostasis Implant

Material, AOC™CT, Osteotene™,

CereteneTM

Regulatory Class:

Unclassified

Classification Name:

Wax, Bone

Product Code:

MTJ

Predicate Device:

Ceremed, Inc.

Ostene®CT Soluble Bone Hemostasis

Implant Material (K091636)

Description of the device:

Ostene CT is a water-soluble surgical implant material for use in cardiothoracic surgery. Ostene CT is an odorless, opaque wax-like material designed to be utilized directly out of the package. It is best used immediately following removal from the package, and can be softened and increased in stickiness by warming and by additional handling and manipulation, if so desired.

Ostene®CT is comprised of a sterile mixture of water-soluble alkylene oxide copolymers. Ostene®CT contains no other additives or colorants. The wax-like material is formed into sticks of various weights ranging from .5 to 5 grams each.

As a bone hemostasis agent, Ostene CT stops bone bleeding by the creation of a physical barrier along the edges of bones that have been damaged by trauma or cut during a surgical procedure. Ostene CT, when placed on bone under moderate pressure, plugs the vascular openings in the bone. This plug prevents further bleeding.

Ostene®CT is provided sterile by irradiation and must not be resterilized.

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Intended use:

Ostene®CT is indicated for use as a water-soluble implant material and for use in the control of bleeding from bone surfaces in cardiothoracic surgery following sternotomy.

Substantial equivalence:

The non-clinical evaluations used to determine substantial equivalence included indications, intended use, design, materials, sterilization, and performance. The comparison demonstrates that the device in this submission is substantially equivalent in indications and intended use; and is identical in design, materials, sterilization, and performance to the predicate Ostene®CT (K091636).

DEPARTMENT OF HEALTH & HUMAN SERVICES





Food and Drug Administration 10903 New Hampshire Avenue Document Control Room –WO66-G609 Silver Spring, MD 20993-0002

Ceremed, Inc. % Tadeusz Wellisz M.D. Chairman 3643 Lenawee Avenue Los Angeles, California 90016

0CT - 8 2010

Re: K102071

Trade/Device Name: Ostene®CT, AOC™ CT, Osteotene™, Ceretene™

Regulatory Class: Unclassified

Product Code: MTJ

Dated: September 24, 2010 Received: September 29, 2010

Dear Dr. Wellisz:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability_. warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

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forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please go to http://www.fda.gov/AboutFDA/CentersOffices/CDRH/CDRHOffices/ucm115809.htm for the Center for Devices and Radiological Health's (CDRH's) Office of Compliance. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm.

Sincerely yours,

Mark N. Melkerson

Director

Division of Surgical, Orthopedic and Restorative Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure

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V. INDICATIONS FOR USE:	
510 (k) Number (if known): K102071	
<u>Device Name:</u> Ostene®CT, AOC [™] CT, Osteotene [™] ,	0CT - 8 2010 Ceretene [™]
Indications For Use: OSTENE®CT is indicated for use as a water-soluble control of bleeding from bone surfaces in cardiotho sternotomy.	
Prescription UseXOR	Over-The-Counter Use
(Per 21 CFR 801.109)	(Optional Format 1-2-96)
(PLEASE DO NOT WRITE BELOW THIS LINE - IF NEEDED.)	– CONTINUE ON ANOTHER PAGE
CONCURRANCE OF CDRH, OFFICE OF DEVIC	CE EVALUATION (ODE)
Data Krane for MKM (Division Sign-Off) Division of Surgical, Orthopedic, and Restorative Devices	
K102071	Division Sign Off

510(k) Number____